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Substitute for form 1449A/PTO				Complete if Known		
				Application Number	N/A	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				Filing Date	Herewith	
				First Named Inventor	Wrosz	
				Group Art Unit		
(use as many sheets as necessary)				Examiner Name	Unassigned	
Sheet	1	of	1	Attorney Docket Number	AT 217	

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Examiner	Date
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